

**REVOCATION OF POWER OF  
 ATTORNEY WITH  
 NEW POWER OF ATTORNEY  
 AND  
 CHANGE OF CORRESPONDENCE ADDRESS**

|                        |                    |
|------------------------|--------------------|
| Application Number     | 09/622,816         |
| Filing Date            | July 17, 2001      |
| First Named Inventor   | Weinberg           |
| Art Unit               | 1615               |
| Examiner Name          | Kishore, Gollamudi |
| Attorney Docket Number | 69-06              |

**I hereby revoke all previous powers of attorney given in the above-identified application.**

☐ A Power of Attorney is submitted herewith.

**OR**

☒ I hereby appoint the practitioners associated with the Customer Number: 23713

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
 Customer Number:

23713

**OR**

☐ Firm or  
 Individual Name

Address

City

State

Zip

Country

Telephone


Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

|           |  |           |                |
|-----------|--|-----------|----------------|
| Signature |  |           |                |
| Name      | Paul Hertz   |           |                |
| Date      | 6/14/06  | Telephone | 1-847-674-8869 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

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|   |  |       |  |     |  |
|---|--|-------|--|-----|--|
| <input type="checkbox"/> Firm or<br>Individual Name |  |       |  |     |  |
| Address   |  |       |  |     |  |
| City  |  | State |  | Zip |  |
| Country   |  |       |  |     |  |
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**SIGNATURE of Applicant or Assignee of Record**

|           |   |  |           |            |  |
|-----------|---|--|-----------|------------|--|
| Signature |  |  |           |            |  |
| Name      | Guy Weinberg  |  |           |            |  |
| Date      | C. 2.5.06   |  | Telephone | 8476736991 |  |

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